

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: 12/14/06		2 Serial/Patent # 10/722,260		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time		06/21/06	\$ 1,020.00
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND		\$ 1,020.00
		8 TO BE REFUNDED BY:		
10 REASON:				
<input type="checkbox"/>	Overpayment	<input type="checkbox"/>	Treasury Check	
<input type="checkbox"/>	Duplicate Payment	<input checked="" type="checkbox"/>	Credit Deposit A/C #:	
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 07--0960 </div>	
Late				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: Frances Hicks		TITLE: Petitions Examiner		
SIGNATURE: <i>Frances Hicks</i>		PHONE: x23218		
OFFICE: Office of Petitions				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <i>Chlois</i>		DATE: 12/15/06		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**